



CARROLL COUNTY CHAPTER Maryland Municipal League, Inc.



2024 Scholarship Program

The Carroll County Chapter of the Maryland Municipal League will offer three (3) \$1,000 scholarships to Carroll County High School students who have been accepted into a College or University or Carroll County students currently enrolled in a College or University in a Graduate or Undergraduate program.

The Application is available for download at www.hampsteadmd.gov under News & Announcements. The application is also available at your High School Guidance Office and at your local Town Office.

Student Eligibility

- Applicant must be a resident of one of the eight (8) *incorporated* municipalities in Carroll County. These municipalities are Hampstead, Manchester, Mt. Airy, New Windsor, Sykesville, Taneytown, Union Bridge, and Westminster.
- Applicant must have a good scholastic standing. (Please attach transcript from the High School you are currently attending.)

Selection Criteria

- Demonstrated commitment to public service, e.g., past or current involvement with civic organizations.
- Applicant's statement of educational objectives and career goals.
- Two letters of recommendation. One (1) from a Faculty Member
- Completion of the scholarship application.
- Essay (typed) – Topic: Municipal Government In Your Town
 1. Identify the challenges faced by **your** Mayor and Council.
 2. Select one or more of these challenges and explain how you would address the challenge if **you** were the Mayor or a Council Member.
 3. Explain how **you** would disseminate **your decision** to address the challenge(s) to the citizens of **your municipality**.

The application must be the 2024 Application Form and must be **received** at the address below by 4:00 p.m. on or before **Friday, April 26, 2024**.

Please submit completed application to:

Council Member Dave Unglesbee
MML Scholarship Chairperson
Hampstead Town Office
1034 South Carroll Street
Hampstead, Maryland 21074

Questions should be directed to Council Member Dave Unglesbee, 443-289-6009 or askdaveu@aol.com.



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2024 Scholarship Program - Student Scholarship Application

1. Name in Full: _____
2. Present Address: _____
Telephone Number: _____
3. E-mail: _____
4. Name of Municipality you reside within: _____
5. Name of the educational institution at which you wish to pursue your studies:

6. List proposed field or specialization of study, toward what degree will you be working, and when do you anticipate graduating?

7. List High School attended. (Submit official transcript for current educational institution.)

High School and State

Expected Date of Graduation

8. Have you ever received academic honors or awards for scholastic achievement?
(Include high school, undergraduate and graduate studies)

No _____ Yes _____

If yes, list: _____

9. Please list your involvement with civic, volunteer and/or charity organizations.
Attach separate sheets if necessary.

10. Name and Title of your Faculty Adviser: _____

Institution: _____ Email _____

I certify that the information given in this application is true and accurate.

Signature of Applicant _____ Date _____